

State of South Dakota
Statement of Financial Interest
Candidate for Public Office

10419 Appendix F
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FEB 16 2010

S.D. SEC. OF STATE

File statement in the office where your nominating petition or convention nomination certification was filed.

Please read information on reverse side before completing this form.

1. Name Susan C. Blake

2. Address 2516 Clarkway

3. Office Sought House of Representatives District 13

4. What is your occupation/profession? Nurse/Educator

5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.

Downtown Health Care

SD Legislature

Sanford Children's Specialty
(Jerome) Clinic

What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.

Nurse/Educator

Legislator

Developmental Behavioral
Pediatrician

6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.

None

What is the nature of your immediate family's association with each?

Filed this 16th day of Feb 10

Ch. Nelson
SECRETARY OF STATE

State of South Dakota

County of Minnehaha) SS.

Verification

I have reviewed paragraphs 1 through 6 of the Information Regarding Statement of Financial Interest (attached), my Statement of Financial Interest and certify that the information reported is a complete, true and accurate representation of my financial interests for the preceding calendar year.

(Signed)

Susy Blake

Sworn to before me this 16th day of February, 20 10.

(Seal)

Ch. Nelson

Officer Administering Oath

Revised 1997

My commission expires: 11-3-2010